# FY2007 Application

# **Folk Arts Project Grant Program**

Intent to Apply Deadline: March 1, 2006 Application Deadline: March 31, 2006

THIS FORM MUST BE TYPED. No handwritten applications will be accepted. Please refer to the guidelines/instructions.

APPLICANT INFO.	Legal Name	Federal Employer ID #
	Doing Business As (DBA), if applicable	
US Congressional District	Street Address	
KY Senate District	City State Z	Zip Code - Plus 4 County
KY Congressional District	☐Miss ☐Ms. ☐Mrs. ☐Mr. ☐Dr.	rector/Administrator Name & Title
To lookup district info, use www.vote-smart.org	Daytime Phone # Second Phone	e # FAX #
or Call your County Clerk's office.	Web Address E-M	1ail Address
SECONDARY APPLICANT  (MUST check one  below)	Legal Name	Federal Employer ID #
, _ ,	Street Address	
Fiscal Agent for APPLICANT	City State Zip	Code - Plus 4 County
Not applicable	Director/Administrator Salutation Dir ☐Miss ☐Ms. ☐Mrs. ☐Mr. ☐Dr.	rector/Administrator Name & Title
	Phone # Fax #	E-Mail
	Has your organization ever applied to the	is program before?
	☐ YES If so, list year	☐ NO
PROPOSAL	Project Title (short phrase)	
	Project Begin Date Project End Date	Amount Requested Match Amount
	# of Individuals who will benefit: # of Artists Youth Adult Participati	3 (
	Contact Person Salutation Contact Per Miss Ms. Mrs. Mrs. Mr. Dr.	son Name & Title
	Phone # Fax # E-Ma	il
KAC Staff Use ONLY		
FY: 2007	APP #:	CLIST #:
App Status:	App Institution:	App Discipline:
Project Disc:	Activity:	Project Race:
AIE Percent:	AIE Description:	Project Descriptors:
Grant Program: <b>FAP</b>	Grantee Race:	Date Received:

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Grantee Race / Ethnicity: Check only One  that best represents 50% or more of staff or board or membership (not audience)	☐ Native Hawaiian/Pacific Islander ☐ Bla	sian ack/African American hite
Activity Race / Ethnicity:		
Check only One 🗌 that best	☐ Asian Individuals ☐ Bla	ack / African American Individuals
represents who the grant or activity	I I Hispanic / Latino individuais	nerican Indian / Alaska Native dividuals
is intended to involve.	□ Native Hawaiian / Pacific Islander □ What Individuals	hite Individuals
	☐ NO Single Group	
Applicant Status	Please choose <b>ONE</b> :	
	02 Organization - Non-Profit 06 Government - Regiona	
	<ul> <li>O4 Government - Federal</li> <li>O5 Government - State</li> <li>O8 Government - Municip</li> </ul>	
	<u>'</u>	
Applicant Institution	Please choose <b>ONE</b> (click the " " to the left of a category a code number.)	to expand group information & obtain
If using a paper version of this	Community Organizations Government	Venues / Presenters
form, please refer to Application Instructions for code numbers	Councils / Service Groups Media	Other
Instructions for code numbers	Educational Institutions Performing Grou	ups
Please read and print instruction	s before completing the Organizational Financial Summ	ary and Project Budget!
Organizational Financial Summar (Not applicable for K-12 schools)	y (Round off all amounts to the nearest dollar. Mak your attached financial statements and budget.)	e sure your figures agree with
Fiscal Year Ends		is Year Next Year ojected) Next Year
Total Revenues		
Total Expenses		
Net (Revenues - expenses)		
Total Net Assets		

Organization Name:\_\_\_\_\_

	9	FY2007 F	olk Arts Project Grant/Application
Project Budget			
This is a critical part of the application. Please be as budget. Indicate where KAC funding will be spent vadditional itemized budget page immediately following and may not exceed one-half of the Total Expenses consist of cash and in-kind contributions but at least Grant Request a cash match of at least \$2250 is requested goods or volunteer services provided by other Project Budget as both Income and Expenses.	vith an asterisk this page. The of the Project 75% of non-Art iired). In-kind a	(*) next to that and suggested maximum Budget. The require s Council income mu amounts may consist	ount. If necessary, attach an for this grant request is \$3000 d income match amount may st be cash (e.g. with a \$3000 of applicant staff salaries and
		Cash	In-Kind
Income			
Grant Request Your Match (equal to, or greater than, the grant request; list sources and amounts)	\$		
Total Income		\$	
Expenses			
Artists' Fees			
Other Salaries or Independent Contractors' Fees			
Production Expenses (e.g., costumes, sets and props, s	supplies)		
Marketing Expenses (e.g., graphic design, printing, pos-	tage)		
Travel (e.g., airfare lodging, meals)			
Other (please list)			

Organization Name:\_

Total Expenses

Total income should equal total expenses. Please round off all figures to the nearest dollar. \*Proposed use of KAC grant funds.

\$

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## Instructions for Completing Narrative

To assist panelists in reading your application, duplicate the number and title of each performance expectation. For example, type "1. Artistic Excellence/Cultural Significance" before your response to #1. Place the organization's name and the words "Folk Arts Project Grant" in the upper right-hand corner of each page.

### Narrative Outline

Please respond to the Introduction and the Performance Expectations below on **four pages or less**. Be sure to include complete information on each bulleted item when writing your narrative.

# Introduction: The purpose of this description is to give the panel an overview of your organization and your project.

#### **Description of your Organization**

• Describe your organization, its history, the role it serves in your community, its current mission and how this project proposal relates to the mission. Include past and projected programs, and any other relevant accomplishments.

#### **Description of your Folk Arts Project**

- Describe the folk or traditional art form that is being presented.
- Describe the specific project for which you are requesting KAC support, including activities and a timeline.

## Performance Expectations

## 1. Artistic Excellence/Cultural Significance (25%)

- Describe how the selected folk artist(s) represents the folk art or tradition being presented in this application. Include relevant biographical information on these artists.
- Demonstrate the excellence of the folk artist(s) using work samples (Note: if the artists are designated in the Kentucky Arts Council's Performing Arts Directory as a Folklife roster artists, they are exempt from the work sample requirement. If this is the case, please note this in your narrative. See page 9 of the Directory for a list of these artists- <a href="http://artscouncil.ky.gov/pad2006.pdf">http://artscouncil.ky.gov/pad2006.pdf</a>.)
- Describe how this project will build audience's awareness of and appreciation for folk arts and traditions.

#### 2. Interpretation and Presentation (25%)

- Describe how folk artist(s) will be presented in a way that will educate the audience regarding the significance of their cultural context (examples: written material, stage introduction, school programs, interpreters, etc.)
- Describe how the represented folk group will be involved in the planning and interpretation of their cultural tradition throughout the project.

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### 3. Planning and Implementation (25%)

- Describe the planning process for this project inclusive of the support of community representatives and specific cultural experts (folklorists, community scholars, local historians, etc.) as applicable.
- Outline a realistic timeline that coincides with project grant request.
- Describe your ability to achieve this project financially including securing matching funds and spending details. (*Note: application budget page should also reflect these elements*)
- Describe how the project will be publicized.

## 4. Gathering and Responding to Evidence (15%)

To assess the impact of the Folk Arts Project Grant upon all participants, you will gather evidence throughout the planning, implementation, and follow-up to the project to determine progress, and to learn about and improve upon the work being done. Effective assessment will include a combination of quantitative (measured by quantity or amount) and qualitative (measured by quality or kind) measures which may include, though not be limited to, surveys, community feedback, anecdotal observation, staff and board assessment, etc. Documentation may include such things as printed materials, photographs, working documents and notes, media coverage, etc.

- Describe your plan for self-assessment and feedback throughout the project.
- Describe the process and tools you will use to gather ongoing data about the impact of the folk arts project on all participants.
- Describe your plan for documenting, assessing, and evaluating the project's success, including reporting methods.
- Describe how knowledge gained throughout the project will be used to continue the promotion and education of folk arts and/or folklife.

#### 5. Cultural Diversity and Accessibility (10%)

- Describe how the project addresses the cultural diversity of your community.
- Describe how your project may reach new or broader audiences and specify what parts of the community might become part of your organization or audience as a result.
- Demonstrate an understanding of disabilities which may be encountered and describe strategies to ensure that everyone is served.

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# Application Checklist

# Include this application checklist as the first page of your application package.

Your application is not complete and will not be forwarded to the panel for review if it does not include the following mandatory information:

•	
One signed original o	of the following:
Folk Arts Project	t Application and narrative
Resumes or bios	of project administrators and consultants (1 page maximum each)
<del></del>	ent (including income and expense statement, and balance sheet) or audit for ecently completed fiscal year)
☐ This year's opera	ating budget
Copy of IRS Det Letter.)	termination Letter (All applicants must provide their IRS Determination
Two copies of the follo	owing:
	rochures, programs, flyers, press releases, feature articles, and other supporting ll help give the granting panel a sense of your organization
Board members	list and bios
If you would like acknow	ledgement of receipt of your application please enclose a
self-addressed, a	and stamped #10 envelope <b>OR</b>
provide an email	address:
· <u> </u>	of support materials, please enclose a  AND stamped mailer for support materials (minimum 6" x 9")
Application Signatures	
	uthorized to submit this application on behalf of the Organization and that all herein are true and complete to the best of my knowledge.
Applicant Signature	Date
Alls	signatures must be in RED ink.
Applicant (Type Name)	

# Mailing Address for Completed Application

Kentucky Arts Council 21<sup>st</sup> Floor, Capital Plaza Tower 500 Mero Street Frankfort, KY 40601-1987